T. purpureum has not been isolated from cases of tinea corporis in the Province, but the reaction is described as a psoriasiform plaque, with no tendency to central clearing (Lewis & Hopper, 1948). *T. purpureum* is endemic in tropical zones.

Similarly, *T. violaceum* has not been isolated during the period of this review from patients with tinea corporis. It produces small areas of ill-defined scaling of the type associated with *T. sulphureum* infections. Both fungi are endothrix trichophytons.

Differential Diagnosis of Tinea Corporis.

The types of tinea corporis with little inflammatory reaction may closely resemble pityriasis alba, but in the latter there is no central clearing and the lesion is not so well circumscribed. *M. canis* infections often resemble impetigo, but again the ringworm lesion is more circumscribed. The duration, distribution (especially symmetry) and absence of irritation are features which suggest psoriasis rather than tinea. Seborrhœic dermatitis and patchy eczema may be difficult to differentiate on occasions, but again distribution, duration, and absence of central clearing sometimes will help.

TINEA MANUUM.

The various dermatophytic eruptions of the hand and their causative fungi differ little from eruptions of the body. There are no special points to make and, with appropriate modifications, the remarks in the section, "tinea corporis," suffice.

The so-called dermatophytid eruption (trichophytid, epidermophytid, microsporid) is commonly found on the sides of the fingers in association with cases of fungus infection between the toes. This dermatosis is a sensitivity eruption, is not contagious, and should be treated as an eczema (not with fungicides). The eruption will settle only when the tinea pedis has been eradicated. It is often mistakenly diagnosed as contact eczema or dermatitis, or even as scabies. The feet require inspection in all cases of this type of eczema of the hand.

In the period reviewed, 34 patients were seen; 28 had tinea manuum alone, three had associated tinea barbæ, and one each tinea capitis, corporis, and pedis. Of three cultures made, two resulted in *T. discoides* and one in *T. mentagrophytes*.

TINEA PEDIS.

General.

This is an important variety of ringworm in Northern Ireland—76 patients were seen in the period under review, five of these were associated with tinea of other parts of the body (unguium two, manuum one, cruris one, and corporis one). Only three cultures were made and *T. rubrum, T. interdigitale,* and *E. floccosum* were isolated.

Tinea pedis caused great inconvenience and discomfort to Allied troops stationed abroad during World War II. Especially was this the case in Burma, where the hot, damp climate favours infection. The condition is so common in India that at